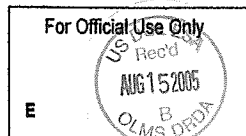


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>6647</u>	2. Fiscal Year Covered From: <u>01</u> / <u>01</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Jack</u> <u>R</u> <u>Bookter</u> P.O. Box, Bldg., Room No., if any <u></u> Street <u>5 Thomas Mellon Circle, Suite 130</u> City <u>San Francisco</u> State <u>California</u> ZIP Code + 4 <u>94134</u>	4. Name, file number, and address of labor organization. Name <u>Team5ters Local 278</u> Labor Organization File Number <u>034030</u> P.O. Box, Building and Room Number, if any <u></u> Street <u>5 Thomas Mollon Circle, Suite 130</u> City <u>San Francisco</u> State <u>California</u> ZIP Code + 4 <u>94134</u>
5. Position in labor organization. <u>Secretary-Treasurer</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name <u>NONE</u> Trade Name, if any: <u></u> P.O. Box, Bldg., Room No., if any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	7.a. Nature of Interest, Transaction, or Income. <u>No benefits were received from any Employer under "A".</u> 7.b. Amount. <u>\$0.00</u>

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>Jack R. Bookter</u>	On <u>08/05/05</u> Date	<u>(415) 467-0450</u> Telephone Number

Name of Person Filing Jack R. Bookter		File Number U-
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any). Name Northwest Administrators Trade Name, if any: Pacific Coast Benefits Trust P.O. Box, Bldg., Room No., if any Street 2323 Eastlake Avenue E. City Seattle State Washington ZIP Code + 4 98102-3393		9. Business deals with: <input type="checkbox"/> a. Labor Organization <input checked="" type="checkbox"/> b. Trust <input type="checkbox"/> c. Employer
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Pacific Coast Benefits Trust Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 2323 Eastlake Avenue E. City Seattle State Washington ZIP Code + 4 98102-3393		11.a. Nature of such dealing. Administrative services 11.b. Approximate dollar value of such dealing. \$139.62 12.a. Nature of interest held or income received. See continuation page 12.b. Amount.

Name of Person Filing	Jack R. Bookter	File Number U-	
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Part B Continuation Page

<p>B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.</p>	
<p>8. Name of Business from Pg. ____:</p>	<p>12.a. Nature of interest held or income received (con't from Pg. <u>2</u>):</p> <p>In the course of Trust meetings, of which I am a Trustee, I received a total of \$139.62 (See attached)</p>

PACIFIC COAST BENEFITS TRUST
2004 MEETING EXPENSES

JACK BOOKTER

"Items of Value" Not Expensed By You

<u>Meeting Date</u>	<u>Expense Date</u>	<u>Benefit</u>	<u>Amount</u>
2/12 - 2/13	2/11/2004	Dinner	\$ 24.59
2/12 - 2/13	2/12/2004	Continental Breakfast	\$ 17.64
2/12 - 2/13	2/12/2004	Dinner	\$ 51.20
2/12 - 2/13	2/13/2004	Continental Breakfast	\$ 15.19
9/29/2004	9/29/2004	Quinn Luncheon	\$ 31.00

Expenses for which You Submitted an Expense Report

<u>Meeting Date</u>	<u>Expenses Description</u>	<u>Amount</u>
		\$ -